

Witness Name: Roger Hargreaves

Statement No.: Third

Exhibits: To follow

Dated: 26 May 2023

UK COVID-19 INQUIRY

THIRD CORPORATE WITNESS STATEMENT OF ROGER HARGREAVES

I, Roger Hargreaves, Director of the COBR Unit, 70 Whitehall, London, SW1A 2AS, will state as follows:

1. I make this third corporate statement, to be read alongside my original corporate statement of 1 February 2023 and my supplementary corporate statement of 28 April 2023. This statement seeks to provide an overview of cross-departmental work on pandemic preparedness from 2017 to 2020 and to answer certain follow-up questions from the Inquiry. I stand ready to clarify or expand upon the evidence contained within this supplementary corporate statement if that would be of assistance to the Inquiry. I understand that some of the questions are being addressed in evidence to the Inquiry from Katharine Hammond.
2. This corporate statement should be read alongside my previous two statements as well as those of my colleagues, and in particular those produced by Alex Chisholm (Permanent Secretary for the Cabinet Office), Matthew Collins (Deputy National Security Adviser) and Katharine Hammond (former Director of CCS).

3. SECTION 1 - NARRATIVE OF PREPAREDNESS PLANNING 2017-2020

- 3.1 In my first corporate statement, at §9.2-9.22, I set out some of the key strands of emergency pandemic preparedness planning from 2002 onwards. In this part of my third statement, I will provide a more detailed chronology of cross-government preparedness planning from 2017 until the start of the Covid-19 pandemic, with a particular focus on the structures, systems and processes in place. This third statement focuses primarily on preparedness for a flu-type pandemic. More general preparedness is dealt with elsewhere. As I set out in my previous statements, the Department of Health and Social Care (DHSC) – previously known as the Department of Health - was the lead government department for pandemic risks and much of the more granular planning.
- 3.2 In October 2016, Exercise Cygnus, which was a cross-government exercise led by PHE to test the 2011 Preparedness Strategy and its supporting plans and arrangements, took place. This was, as I said in my first statement, a key milestone for pandemic preparedness and I set out in that first statement the learning outcomes and recommendations made at §9.92-§9.101.
- 3.3 The outcomes of Exercise Cygnus set the agenda for further work on pandemic preparedness, which was then set in motion by the February 2017 meeting of the NSC(THRC). This, in turn, set the agenda for the key bodies whose priority was preparedness for a pandemic. This work was, in some areas, interrupted in late 2018/2019 by a refocus on EU Exit no-deal planning (Operation Yellowhammer). Whilst certain elements of pandemic planning were protected, staff were redeployed and the effect was a slow-down of other work in pandemic preparedness until later 2019, soon after which the Covid-19 Pandemic struck and government's attention properly turned from preparedness and resilience planning for a hypothetical future event to combatting Covid-19.
- 3.4 In this section, I will:
- 3.4.1 Identify certain key cross-departmental groups that were focused on pandemic preparedness from 2017 to 2020 and how they were overseen, their processes and output, how they fed back into planning, the impact of Operation Yellowhammer, and the position in later 2019 / early 2020, prior to the outbreak of the Covid-19 Pandemic; and
 - 3.4.2 Address the abolition of the NSC(THRC) in 2019.

The key cross-departmental groups

- 3.5 In this section, I will concentrate on the following key cross-government bodies that were focused, wholly or partly, on pandemic preparedness.
- 3.5.1 The National Security Council Ministerial Subcommittee on Threats, Hazards, Resilience and Contingencies (NSC(THRC))
- 3.5.2 The Pandemic Flu Readiness Board (PFRB); and
- 3.5.3 The Resilience Capabilities Programme Board (RCBP).
- 3.6 I understand that officials from the Cabinet Office are seeking to assist the Inquiry with summaries for the meetings of these and other bodies that met, especially where there was particular focus on pandemic preparedness.
- 3.7 As above, from 2017-2020, the work of CCS on pandemic preparedness was guided by the aims and objectives set by the NSC(THRC) in 2017, which in turn were set following involvement from the Risk Assessment Steering Group (RASG), review by Expert Challenge Groups, review by Government Chief Scientific Advisers network, cross-Whitehall clearance from Senior Civil Servants, and finally, ministerial clearance at the NSC(THRC). This process, and the content of the NSC(THRC) meeting on 21 February 2017, is detailed in the statement of Katharine Hammond.
- 3.8 The Inquiry will be aware that there were a large number of other groups involved in preparedness, many of which sat at departmental level, such as the Pandemic Influenza Preparedness (PIPP) Board in the DHSC. In this statement, I will focus on the cross-departmental bodies that were working directly or indirectly towards the objectives set by NSC(THRC) in February 2017. However, as I said in my second statement at §2.2-§2.3, most planning, response and recovery activities are delivered at the local, developmental and agency level in line with their existing responsibilities and the continuity and subsidiarity principles. I have addressed the PIPP in my previous statement previously and understand that there is evidence elsewhere from DHSC on PIPP, and also on the Pandemic Flu Implementation Group (PFIG).
- 3.9 The Cabinet Office's role is to set the overarching framework for emergency preparedness, response and recovery in line with the UK Government's responsibilities and respecting devolved competencies, and to coordinate activity where necessary due to the scale and complexity of the issue or until a lead department is identified.

(i) NSC(THRC)

- 3.10 Over this period, the NSC(THRC) was generally chaired by the Cabinet Office Minister with responsibility for resilience, usually the Chancellor of the Duchy of Lancaster, although the Committee had been chaired by the Prime Minister from time to time (including the meeting relating to pandemic influenza on 21 February 2017). The Deputy Prime Minister also chaired one meeting of the ministerial NSC(THRC) in 2010. NSC (THRC) (Officials) was chaired by the Deputy National Security Adviser. The NSC (THRC) (Resilience) (Officials) was chaired by the Director of CCS. These are referred to below as NSC (THRC)(O) and NSC(THRC)(R)(O).
- 3.11 As described in my second statement at §6.3, “*collective agreement for decisions engaging collective responsibility must always be sought at a Cabinet or Cabinet committee meeting or through correspondence to a Cabinet Committee (a ‘write round’).*” The purpose of the THRC was to take collective agreement for decisions relating to the full range of threats, hazards and resilience issues.
- 3.12 As the Secretariat for NSC(THRC), the CCS, in discussion with departments and relevant official boards, would advise the Chair on which decisions would need to be taken to NSC(THRC), and when, including issues discussed in committee meetings or through a write round. Not all decisions taken in relation to preparedness therefore needed to be decided via the THRC.
- 3.13 Following Exercise Cygnus, the CCS made the decision to take to THRC an item on pandemic influenza, in agreement with DHSC as Lead Government Department for pandemic preparedness. At this meeting, the DHSC and CCS proposed a programme of work to implement the recommendations of Exercise Cygnus and improve pandemic preparedness, which was undertaken through the PFRB. The THRC received reports on such work, and made decisions as needed. The bodies, such as the PFRB, which reported to the THRC provided updates to it but were not subject to a formal assurance process by the THRC.
- 3.14 The work of the THRC and its official subcommittees was paused or lessened from December 2018 due to EU Exit work.
- 3.14.1 The Ministerial THRC did not meet in 2019 – its function was folded into the EU Exit (Preparedness) Committee from January 2019. This was consistent with its role from July 2018, when it had met repeatedly to consider issues relating to EU Exit;

- 3.14.2 The THRC (O) met on 1 May 2019 (INQ000196513), which was the first time that it had met in its usual format since October 2018 (there had been two extraordinary meetings - unrelated to pandemic preparedness - in November and December), and it also met on 18 July 2022 (INQ000196515). The topics with cross-over/partial relevance to pandemic-related issues considered at the THRC (O) in 2018-19 included governance of Critical National Infrastructure (CNI) Security and Resilience; understanding what is critical of CNI Sectors; EU Exit situation and impacts; the framework for assessing sector security and resilience (and prioritisation given Operation Yellowhammer); the spending review and CNI bids; sector security resilience plans; and the National Security Risk Assessment.
- 3.14.3 The THRC (R) (O) had met four times in 2018, with the last of those being on 19 December 2018 (INQ000196514) when it was announced it was to be paused due to reprioritisation of work and met again on 15 July 2019 (INQ000196517), where again it was stated that it would be resumed as and when appropriate. The topics with cross-over/partial relevance to pandemic-related issues considered at the THRC (R) (O) in 2018-19 included: Short term horizon scanning; Resilience standards and the Resilience Capabilities Programme; Capability mapping and the National Security Capability Review Update; Preparing for the Spending Review; the NSRA; EU Exit planning and prioritisation; holistic support to victims; Resilience standards; mutual aid and guidance for Local Authorities during an emergency; crisis management professionalism; transferable lessons from Operation Yellowhammer; professionalism of crisis management; and resilience communications to small and medium sized enterprises.

(ii) the PFRB

- 3.15 As I have previously set out, the PFRB was created in 2017 as a detailed cross-government work programme which was primarily focused on delivering the recommendations of Exercise Cygnus as agreed by NSC(THRC). The PFRB sought to deliver on a number of workstreams and then report on its progress to NSC(THRC).
- 3.16 The PFRB was jointly chaired by the DHSC and CCS; and its core membership consisted of relevant departments across governments, representing all sectors, and the Devolved Administrations, with other departments and organisations called upon to attend where relevant, such as NHS England. The governance of the PFRB was

set out at the meeting on 13 April 2017 (INQ000006496). It was said that “*the Board would take direction from, and report to, NSC (THRC) through both the Secretary of State for Health and the Minister for the Cabinet Office, but it was not intended to supersede departments’ own governance structures for managing the risk to their interests and the sectors they represent.*” Ultimately, therefore, while the PFRB acted to promote preparedness across government and to oversee departmental preparedness, the responsibility for preparedness in each individual sector lay with the responsible departments (e.g. DHSC for health and social care) or with the Devolved Administrations.

3.17 In Terms of Reference dated 3 April 2017 (INQ000186710), the scope and responsibilities of the PFRB, the membership and the roles and responsibilities of those members, and governance and accountability, were laid out. The scope and responsibilities of the PFRB were defined as:

3.17.1 Overseeing the delivery of the PFRB’s work programme and associated outcomes and products;

3.17.2 Providing an independent forum to challenge and question progress;

3.17.3 Co-ordinating the work of departments and devolved administrations and to provide a forum for clarifying and managing departmental responsibilities;

3.17.4 Agreeing arrangements for maintaining and assuring the capability to manage the non-clinical aspects of pandemic influenza; and

3.17.5 Where policy was devolved, to provide a forum for exchanging best practice and developing common approaches.

3.18 In its first year, the PFRB was set five workstreams by NSC(THRC) in respect of pandemic influenza readiness, particularly focused on implementation of the Exercise Cygnus recommendations:

3.18.1 Workstream 1 - Health Care: An appropriate capability to provide health care in England (during a severe pandemic). This was led by DHSC via the Pandemic Influenza Preparedness Programme (PIPP) Board.

3.18.2 Workstream 2 - Adult community and social care: An appropriate capability to provide adult social care in England (during a severe pandemic)

- 3.18.3 Workstream 3 - Excess Deaths: Sufficient capability to manage the volume of additional deaths during a pandemic in a respectful and acceptable manner.
 - 3.18.4 Workstream 4 - Sector Resilience: Confidence that critical sectors have adequate resilience to anticipated levels of employee absence during a pandemic.
 - 3.18.5 Workstream 5 - Cross-Cutting Enablers: A legislative vehicle for pandemic response measures; and effective communications arrangements in place across all elements of preparedness for pandemic influenza.
- 3.19 The initial aim was to complete the workstreams by the first quarter of 2018, and I attach the high-level workplan from August 2017 (INQ000044987), which was updated over the course of the year. Attached are the documents that were created in the first year of the PFRB and (a) set the path for it and the workstreams under it and (b) updated the NSC(THRC) on that ongoing work:
- 3.19.1 A background note from 1 June 2017 setting out the work set in motion (INQ000006617), updated on 13 June 2017 (INQ000006630) and 15 September 2017 (INQ000006810);
 - 3.19.2 An updated overview of the work to be undertaken by the PFRB in light of its Agenda and the actions arising from the NSC(THRC) meeting on 21 February 2017 (INQ000044970);
 - 3.19.3 A note on preparedness for pandemic influenza dated 18 September 2017 setting out the work set in motion (INQ000045098) and attaching to it the work plan for each of the five workstreams (INQ000006815); and
 - 3.19.4 A letter dated 25 August 2017 from Katherine Hammond, Director CCS, to Mark Sedwill, National Security Adviser, providing a six-month update on the progress of the work overseen by the PFRB (INQ000045034). Following that update, on 21 September 2017, a six-month review letter was sent to Permanent Secretaries updating them as to progress, and I attach the copy sent to the Permanent Secretary of the Northern Ireland Office by way of example (INQ000196511).
- 3.20 The PFRB met on a total of fourteen occasions: first on 29 March 2017, and thereafter up to November 2018, with an expectation of meeting approximately every two

months. Due to the prioritisation of Brexit matters in 2019, the PFRB did not meet again until November 2019 and then once more on 23 January 2020. At the final meeting, plans were set in motion for further exercises and reporting, but matters were overtaken by the events of the Covid-19 Pandemic.

3.21 In the spring of 2018, the PFRB sought to transition from its first year programme into its second year programme (see Paper 9 from December 2017 and Paper 5 from February 2017, Annex B). On 20 March 2018, the CCS updated the Chancellor of the Duchy of Lancaster and the Secretary of State for Health providing an update on progress made to enhance preparedness in the event of an influenza pandemic (INQ000007253), to be circulated to other members of the THRC (this letter was circulated on 8 April 2018). Paragraphs 2 and 3 of the letter to the Chancellor of the Duchy of Lancaster set out the work done by that point and the proposed activity for the second year:

2. Our subsequent work has focused on enhancing national arrangements. This sustained collective activity has contributed to enhanced preparedness, although there remains work to finalise national arrangements and properly embed the policies and plans. We have:

- improved plans of the health sector to flex systems and resources to expand beyond normal capacity levels;*
- developed plans to prioritise and augment adult social care and community health care during a pandemic response;*
- refreshed, and will shortly reissue, guidance for local responders on planning for large numbers of additional deaths. We have undertaken comprehensive analysis of capability across the country which is informing the development of a range of practical and policy measures to drive improvements;*
- updated the planning assumptions for workforce absence in critical sectors and, through work with Lead Government Departments, have stress-tested preparedness for both the peak and duration of absence in critical sectors;*
- agreed the UK Government policy measures for inclusion in a draft Pandemic Influenza Bill to provide legislative flexibilities to support the response to a severe pandemic. The draft Bill will be held internally and taken through Parliament only if required. We have worked closely with colleagues in the Devolved Administrations to seek to achieve a one-UK approach;*
- prepared a comprehensive four nations pandemic influenza health-focused communications strategy; and*

- *prepared options to ensure Government thinking is supported by moral and ethical advice.*

3. *As well as finalising national arrangements, it is important to ensure guidance for the local resilience community is both up to date and streamlined to support the continued enhancement of local preparedness. Proposed activity for the next 12 months centres on:*

- *finalising national arrangements including the delivery of:*
 - o *service-facing guidance to be deployed in a severe and sustained pandemic to support the NHS response pandemic;*
 - o *updated service-facing guidance for the delivery of augmented adult social and community care during a pandemic;*
 - o *an updated Pandemic Influenza Business Checklist, in conjunction with business representative bodies;*
 - o *further guidance on specific aspects of the death management process and possible measures central government could take to provide additional support to local responders;*
 - o *completed internally-held clauses covering both the UK Government and Devolved Administration content and supporting documentation to finalise the UK-wide draft Pandemic Influenza Bill;*
 - o *coherent and planned wider Government communications messages; and*
 - o *an expert group to enable Government decision-making to be informed by moral and ethical advice (further advice to be sent to Cabinet Office and DHSC Ministers shortly).*
- *preparing products to support the continued enhancement of local arrangements including:*
 - o *refreshing the four nation UK Influenza Pandemic Preparedness Strategy 2011 (DHSC led);*
 - o *developing a pandemic influenza Resilience Standard, against which local capabilities and readiness can be better assessed (CCS/DHSC led); and*
 - o *exercising pandemic response plans.*

3.22 The year 2 actions were underway in 2018 including, for example, meetings with the Welsh (INQ000211678, INQ000211684) and Scottish (INQ000211676, INQ000211677) Devolved Administrations to enhance preparedness. As of June

2018, work was being undertaken for both local and national arrangements (INQ000021783). And further work had been completed by November as set out in the Action Trackers, updated for each meeting.

- 3.23 On 29 November 2018, a submission was made to the Chancellor of the Duchy of Lancaster that set out the impact of Operation Yellowhammer on the cross cutting work of the Cabinet Office and CCS (INQ000211664). The PFRB did not meet for a year from November 2018 due to all departments needing to prioritise resource on EU Exit work, though work continued in the meantime on the Pandemic Flu Bill and the Excess Deaths Framework. This position was circulated to members of the THRC(O) by way of a letter dated 22 January 2019 (INQ000196512).
- 3.24 The PFRB then met for the penultimate time on 27 November 2019. A letter was sent to all the members of the PFRB on 11 November 2019 to the meeting and setting out the purpose of restarting the PFRB (INQ000047283) and an updated briefing note was created (INQ000007693). The emphasis at this meeting was to reinvigorate the PFRB and to update and progress the ongoing workstreams over the next twelve months.
- 3.25 It was anticipated that a further update would be provided after April 2020 when workstreams had restarted and been completed, and when the planned cross-Government pandemic exercise had been completed (as discussed in the 27 November 2019 meeting). It was anticipated that this update would be to the THRC (as set out below, at around this time it was envisaged by officials that the THRC would be stood up again after the General Election).
- 3.26 Thereafter, the PFRB met one more time (in January 2020), after which it too ceased to meet as Government focus turned to combatting the pandemic as opposed to readiness. Immediately before the pandemic broke, the PFRB had been focused on workstreams 3 and 5 and had agreed to hold a cross-government exercise in Spring 2020 to test workstreams and reassess priorities identifying areas for further work. The proposal was that the 2020 Pandemic Flu Exercise would be a planned two-day command post exercise (albeit the structure was not finalised) and would focus on excess deaths, wider communication messaging, community and social care pressures, and sector resilience (including schools and prisons) (INQ000007795). As the note recorded, the pandemic flu exercise was to be scheduled at this time because it was only at this stage that a number of the work streams had either been completed or were nearing completion, so that what had been completed could be

tested so as to identify which areas are less prepared and require further work. However, due to the emerging Covid-19 crisis, the pandemic planning exercise was not carried out and no further update to THRC was given.

(iii) RCPB

- 3.27 An important part of the preparedness framework in the UK is resilience capabilities. In 2005, the UK Resilience Capabilities Programme (RCP) was established to monitor, build and maintain capability to respond to and recover from civil emergencies. I set out the history, workstreams, and output of the RCP in my second statement at §4.3-§4.19 onwards. This was another area of preparedness planning that was ultimately overseen by the NSC(THRC), chaired by the Chancellor of the Duchy of Lancaster.
- 3.28 The RCP was advanced through quarterly meetings by the RCP Board (RCPB), chaired by the CCS, which monitored the strategic profile of the RCP. I listed the RCPB's aims and objectives at §4.7 of my second statement and the findings of the last Resilience Capabilities Review in 2020 at §4.18-§4.19. Specifically in relation to Pandemic preparedness, I set out the delineated responsibilities of the DHSC (primarily through the PIPP), the PFRB and the RCPB in my second statement at §4.22-§4.40. From early 2017, the RCPB recognised the delineated responsibility of the PFRB to address matters specifically relating to cross-government pandemic flu preparedness (INQ000044318).
- 3.29 Subsequent to February 2017, the RCPB met six times between 7 March 2017 and 10 December 2019.
- 3.30 The aim of the RCPB was to build national capability to meet the requirements set out in the National Resilience Planning Assumptions (NRPAs). It did this by sharing and discussing cross cutting issues and interdependencies, sharing good practice and providing a forum for raising challenges. A focus of the RCPB in 2017 was the creation of a dashboard *"to provide a high level readout of our preparedness to deal with civil emergencies. The dashboard aggregates complex data into a digestible form. It is not an oracle, but a consensus tool based on three core principles: Transparency ... Comparability ... Specificity"* (INQ000205290).
- 3.31 At the one meeting in 2018, on 25 May, the RCPB submitted a proposal for refreshed resilience capabilities to NSC(THRC) (R) (O) (INQ000196407). However, the scope and response capabilities for infectious disease remained unchanged.

- 3.32 As with the PFRB there was a de-prioritisation of activities arising from the prioritisation on Operation Yellowhammer in 2018/19.
- 3.33 The RCPB met twice again in 2019, once on 25 June and again on 10 December. Whilst the thrust of pandemic preparedness remained with the PFRB, certain capability workstreams arising from the RCPB (INQ000205317) had cross-over application, some of which included planning for influenza pandemics:
- 3.33.1 Antibiotic distribution, DHSC being the lead department;
 - 3.33.2 Coordination of response abroad for casualties and fatalities abroad, FCO being the lead department;
 - 3.33.3 Excess deaths, Cabinet Office being the lead department;
 - 3.33.4 Health service disruption , DHSC being the lead department;
 - 3.33.5 Human Aspects (meeting the needs of people, especially vulnerable people), Cabinet Office being the lead department;
 - 3.33.6 Infectious diseases response, DHSC being the lead department;
 - 3.33.7 Mass casualties, DHSC being the lead department;
 - 3.33.8 Mass fatalities, the Home Office being the lead department;
- 3.34 As of December 2019, a priority for the RCPB was to agree the proposed work programme, align the RCP with the 2019 NSRA, and agree plans for future Response Capability Surveys (INQ000192605).

(iv) Other bodies

- 3.35 In addition to the key bodies listed above, as with many Cabinet Committees and Sub-Committees, there were a wide range of other bodies that in some way reported to the THRC. These were primarily working groups focused on specific aspects of resilience, threats or hazards (separately to pandemic influenza planning). There is no comprehensive list of bodies that would have been ultimately accountable to the THRC, but the examples below, which reported to the THRC (R) (O), give an indication of the wide variety of topics that were covered:

- 3.35.1 The Infrastructure Resilience and Security Working Group (IRSWG), which was largely concerned with Infrastructure issues; and
- 3.35.2 The National Security Secretariat (NSS) Crisis Review Implementation Programme Board, which was largely focused on technical and physical improvements to the COBR meeting room complex.

The impact of the abolition of the NSC(THRC) in July 2019

- 3.36 When a new government is formed it is for that new administration to organise Cabinet structures and committees as it sees fit. Boris Johnson MP was appointed Prime Minister on 24 July 2019. On 26 July 2019 he was provided with a submission from the then Cabinet Secretary, Mark Sedwill, as to Cabinet structures (INQ000196516). The proposal was intended to reflect the administration's focus on EU Exit (Under this proposal there were to be three committees to deal with EU Exit (EU Exit, Economy and Trade; EU Exit, Economy and Trade (Strategy), and EU Exit (Operational)), and three formal Cabinet Committees on non-EU exit business: the National Security Council; Domestic Affairs and the Union, and Parliamentary Business and Legislation). It was noted that *"this proposal means that no other Committees, ad hoc ministerial groups, implementation taskforces or inter-ministerial groups, including those set up by your predecessor... would continue to meet. Of course, should a specific issue come up that you think merits a discussion with a different formation of ministers to those in the Committees I have suggested, a MISC Cabinet Committee could be set up with little notice, as many previous PMs have done. None of this precludes you from deciding on a more radical setup of Committees in the autumn"*. The Prime Minister essentially adopted this structure and these committees were announced on the GOV.UK website on 29 July 2019. As a result of this decision the THRC stopped meeting, though it could be constituted again if needed, or a decision could be taken by a committee of another name but to consider the same issues.
- 3.37 I have been asked to describe the THRC's relationship to certain specific bodies and the impact of its abolition, including on the reporting processes for those bodies. It may assist, in response to this question, to set out first which structures continued after the change in Prime Minister on 24 July 2019.
 - 3.37.1 While the THRC was not stood up again, significant parts of the role of the THRC (O) were adopted into a new CNI Security and Resilience (Officials)

group. It reported to the NSC (INQ000196518). It had met for the first time on 9 January 2019 (papers INQ000196521; minutes INQ000196522) and an update was provided to the Minister for the Cabinet Office on 19 December 2019 (INQ000196518). The meeting on 9 January 2020 considered, for example, the 2019 Sector and Security Resilience Plans, which had previously been provided to THRC (O) (INQ000196520). It set up a Vulnerabilities Working group (INQ000196523). A division of its roles versus other bodies in the CNI area is here (INQ000196524).

3.37.2 Further, as set out above, the NSC remained in place as one of the 3 non-EU focused formal Cabinet Committees.

3.37.3 Finally, as set out above and in the previous corporate statements, a number of pandemic preparedness work streams had already been amended/paused whilst a focus was placed on preparations for exit from the EU in the event of a no-deal. The prioritisation of CNI workstreams in that context was set out by Katharine Hammond by way of a letter to THRC(O) members dated 22 January 2019 (INQ000196512). Likewise, some major pieces of work such as the NSRA had been completed by 29 July 2019. As a result, some of the work which previously might have featured at THRC discussions was no longer being pursued actively in any event.

3.38 A general election was held on 12 December 2019. On 14 February 2020 Mark Sedwill (then Cabinet Secretary) provided advice to the Prime Minister (INQ000196525) that "Following your re-election in December we agreed to come back to the issue of Cabinet Committees after you reshuffled your Cabinet. This advice proposes where I think you should make changes to better manage the business of Government and drive forward progress across your priority areas...We should reinstate a standing Committee to consider Threats, Hazards, Resilience and Contingencies (THRC). This has worked well in the past to ensure departments are held to account on critical infrastructure resilience and preparedness for civil crises. This has previously been chaired by a Senior Cabinet Office Minister with responsibility for resilience; however, I recommend this should be Chaired by the Home Secretary."

3.39 In the event the structures were not updated after February 2020 prior to the pandemic, which was developing by that time, and the structures which operated

during the Module 2 relevant period are described in Simon Case's corporate statement.

3.40 The Cabinet Office is not aware of any decisions in respect of pandemic preparedness that required collective agreement and were delayed or not taken as a result of the THRC not being in operation. As a point of principle, it would always be possible, where collective agreement is required, for a decision to be taken by the most relevant committee. Given that a lot of the pandemic preparedness work was on pause during the second half of 2019, this principle was not practically tested.

3.41 Turning to the specific bodies feeding into the THRC, and particularly the PFRB and the PIPP, I attach a document from 23 May 2017 setting out the cross-government arrangements for pandemic flu, including an organogram (INQ000105285). As to how individual bodies were affected in practice by the THRC stopping meeting:

3.42 *The PFRB:*

3.42.1 The PFRB's operational activities were not governed directly by the THRC.

3.42.2 The PFRB would normally have updated the THRC by way of an annual progress report. As set out above, the PFRB did not meet between November 2018 and November 2019 as work on EU Exit was prioritised. It did meet in November 2019 and January 2020, but not again after that. It expected to provide an update to the THRC in 2020, but did not anticipate doing so in any event until March or April 2020, or after the planned pandemic preparedness exercise, by which time the Covid-19 emergency had already developed.

3.42.3 This is set out in the Forward Look paper at the 27 November 2019 meeting, which stated that "*under the PFRB's current governance arrangements, the Board reports on progress to NSC (THRC). Due to EU Exit pressures, NSC (THRC) were not updated at the end of Year 2, March 2019. It is proposed that an update is sent to NSC (THRC) in March 2020, 3 years after the start of the programme. This should set out all the work that has been completed to date, as well as seeking agreement to our proposed timetable to complete the programme.*" It was therefore anticipated that by the time the next update was provided, the THRC would be reconstituted. In the meantime, the THRC could be reconstituted in short time, or NSC could receive relevant items if need be. Individual ministers in departments remained engaged on the Draft

Pandemic Flu Bill and the Moral and Ethical Group. The PFRB therefore continued to act on the assumption that the THRC would in due course (or if necessary) be reconstituted, and no other body took over its role.

3.43 *The PIPP:*

3.43.1 As set out in my initial and supplementary statements (see paragraphs 4.33-4.40 of the latter), the Pandemic Influenza Preparedness Programme (PIPP) reported (and reports) to the DHSC and was responsible for health sector preparedness for the event of a pandemic influenza. The PIPP was formed in 2007 and usually met twice a year. The PIPP met 11 times since 2016 and produced numerous preparedness reports.

3.43.2 In so far as its work overlapped with the work of the PFRB (discussed above), then the PIPP was kept informed of the PFRB work. The two groups had members in common to prevent duplication and keep them aligned, for example the DHSC co-chair of the PFRB sat on PIPP, as did the CCS Deputy Director for Readiness and Response. Thus, at the PIPP meeting on 16 April 2018 an update from DHSC was discussed (paper INQ000105358, minutes INQ000068398) which set out the progress to date and further commitments that had been made under the PFRB workstreams set up following the THRC meeting in February 2017.

3.43.3 With regard to the date on which the NSC(THRC) was abolished, the PIPP met on 1 October 2018 (INQ000105385) and then again on 17 December 2020 (INQ000105729) and since, through the Module 2 period. Given that, and given that the PIPP reported primarily to DHSC, it is not clear that the abolition of the NSC(THRC) had any impact on PIPP's workings.

3.44 *The National RCPB*

3.44.1 The RCPB Terms of Reference in 2012 set out that "*the Board reports progress to the National Security Council sub-committee on Threats, Hazards, Resilience and Contingencies; [and to the] Official Committee on Resilience (NSC (THRC) (R) (O)) on the delivery of the NRCP. NSC (THRC).*" From 2016 onwards the NRCPB was involved in the redesigning of the Resilience Capabilities Programme (RCP) as described in the RCP guide (see paragraph 4.17 of my supplementary statement of 28 April 2023). This also affected the nature of the work that was reported to THRC.

3.44.2 Some of the work of the National RCPB was adopted by the CNI Security and Resilience (Officials) meetings, for example the review of Sector Resilience plans. The other work of the National RCPB was not considered by the CSR(O) at its January meeting, though much of that work was paused or slowed in any event due to Operation Yellowhammer.

3.45 *The Biological Security Strategy*

3.45.1 I understand a separate statement has been provided in relation to the BSS.

4. SECTION 2 - THE NSRA/NRA PROCESS

4.1 In my second corporate statement, at §3, I described the NRA/NSRA processes from 2010 onwards, and provided detail as to the methodology of their creation and content for each up to 2022.

4.2 I also provided analysis of the roles of RASG/RASB at §3.49 onwards and their role in the formulation of content and direction for the NRAs/NSRAs.

4.3 I have been asked to provide further information on the NSRA/NRA process, specifically about:

4.3.1 The timeline between the 2016 NRA, the 2017 NSRA refresh, and the 2019 NSRA;

4.3.2 The role of the expert challenge groups the cross-departmental and cross-government challenge functions and the methodology review groups for the NRAs/NSRAs, including their role and composition

Timeline between the 2016 NRA, the 2017 NSRA refresh, and the 2019 NSRA

4.4 In the period between the 2017 NSRA Refresh and the 2019 NSRA, the NRA and NSRA were combined, in order to deliver a unified risk assessment framework and directly compare malicious and non-malicious, domestic and international risks.

Expert challenge

4.5 I have been asked to provide more detail on the ways in which scientific expertise was used to inform the NSRA risk assessments.

4.6 The methodology section of the 2019 NSRA explained the following:

For each NSRA risk there is a designated risk assessment owner. Risk assessment owners (Government Departments or Agencies) are responsible for identifying national security risks related to their areas of interest and expertise and submitting up-to-date, robust and credible information to CCS about those national security risks. Risk assessment owners may not be experts in or responsible for every aspect of a risk. As a result, they must work with others to collate relevant information, including:

- *their Chief Scientific Adviser;*

- *other Government Departments and Agencies (including security and intelligence agencies where required);*
- *industry stakeholders (particularly Critical Sectors) where appropriate; and*
- *any relevant internal or external scientific and policy subject experts, as appropriate*

4.7 At the start of the NSRA risk cycle, the relevant Risk Assessment Owner would provide a risk scenario spreadsheet for each risk that they owned. The Risk Assessment Owner for pandemic flu and emerging infectious diseases was DHSC. For the 2019 NSRA the DHSC provided these risks in November 2017 (INQ000045375). The risks were subject to further scientific input. For example, the risk scenario for pandemic influenza referred back to the updated modelling of an influenza pandemic produced by the Scientific Pandemic Influenza Group on Modelling (SPI-M) in November 2018 (INQ000055870).

4.8 The risks in the NSRA were also evaluated by expert groups. I exhibit a briefing paper from January 2018 which sets out this process (INQ000186695). For the 2019 NSRA, risks were evaluated by the following expert groups: CBRN Scientific Review Group, Security Expert Review Group, International Expert Review Group, Human Welfare Expert Review Group, Behavioural Science Expert Group, Economic Expert Review Group, and Essential Services Expert Review Group. In addition, the Natural Hazards Partnership (NHP) provided expert advice on risks related to environmental hazards.

4.9 The Behavioural Science Expert Group (“BSEG”) had provided advice in 2013 on (for example) how the outbreak of a disease might lead to public anxiety/outrage (INQ000037207). In September 2014 BSEG produced further reports at the request of the Chief Scientist, including lessons learned from international case studies (INQ000205280) and the possible psychological effects of a future influenza pandemic (INQ000196417). The BSEG membership in 2019 included experts in risk communication, community resilience and vulnerable groups (INQ000205316). The BSEG reviewed pandemic flu in the 2019 iteration of the NSRA (INQ000045772). The International Hazards Expert Review Group considered Emerging Infectious Diseases (INQ000045815).

5. SECTION 3 - NATIONAL RESILIENCE

5.1 I have also been asked to provide further material on the below programmes/work.

The National Resilience Capabilities Programme

5.2 I discussed in my previous supplementary statement the NRCP Board and the RCP workstreams (see paragraphs 4.10-4.15). I have been asked to give more detail about the local response workstream. This was the subject of a Local Response Capability Assessment in late 2015, which I exhibit here INQ000205282, INQ000205283; INQ000205284. This was discussed at the joint management group between CCS and DCLG RED, and taken to an NRPB Board on 8 October 2015 (papers INQ000192479 minutes INQ000205285). Work that flowed from this included a DCLG review of the policy and practice to identify potential barriers preventing emergency responders from sharing information to protect vulnerable people (INQ000205287). A number of remaining issues were raised in the Resilience Capability Survey in 2017 and their responses assessed against gaps identified in the LRCA (INQ000205289). Further work to support consistency and improvements in preparedness and provide the basis for potential future assessments was included in the National Resilience Standards workstream.

The National Resilience capability review project

5.3 Separately to the RCPB, but as part of the Cabinet Office's role in respect of national resilience, in 2017 CCS undertook a National Resilience capability review project which was part of the 2018 National Security Capability Review. The National Security Capability Review is discussed in the corporate statement of Matthew Collins. This work had four interrelated workstreams, which were set out in four notes provided to the National Security Adviser in early October 2017:

5.3.1 *Victims Support* (INQ000191106): the purpose of this workstream was to provide better support for victims, by combining knowledge and creating a platform for sharing case data across government and local agencies. This was to be done in part by use of ResilienceDirect.

5.3.2 *Assurance* (INQ000191103): this workstream recommended the creation of a Local Resilience Team ("LRAT") which would be housed within CCS and supported by DCLG Resilience and Emergencies Division (RED) to coordinate LRF assurance plans, facilitate self-assurance and peer review,

promote best standards and work directly with LRFs to drive improvements. The proposed LRAT was not included as a recommendation in the National Security Review published in March 2018. I understand that this was because resources were not prioritised for this work.

5.3.3 *Understanding local capacity* (INQ000191104): this workstream looked at how to identify more rapidly where capacity and capability of local responders might be overwhelmed in a major civil emergency, or be showing signs of overstretch. It was proposed that the Government Liaison Officer (GLO) function should be strengthened (these were principally DCLG RED staff)

5.3.4 *Supporting local responders in a crisis* (INQ000191105). This related to better mutual between local areas, and also included a recommendation for a National Crisis Surge Team.

5.4 In the event no additional resource was identified to deliver the NSCR recommendations, and the National Security Capability Review published in March 2018 did not contain, for example, a commitment to create a LRAT¹ (this Review is considered in the statement of Matthew Collins). I exhibit (INQ000205298) a table setting out progress against the above in May 2018, which was taken to a CCS business planning session on 11 May 2018. As a result of that business planning session, and due to the need to deliver identified outcomes in a 'fiscally neutral' way, three specific areas of work were identified:

- *Development of a cadre of Senior GLOs;*
- *Establishing a crisis management / resilience profession; and*
- *Issuing a refreshed expectation set for LGDs*

5.5 A summary of the work done was sent to Oliver Dowden MP, Minister for Implementation at the Cabinet Office, on 23 July 2018. This recorded that "*No additional resource has been identified to deliver the NSCR recommendations. We have, therefore, developed a plan to deliver the thrust and overarching objectives of the resilience recommendations within existing resource. This will include conducting a number of pilots, which will inform our work on the forthcoming Spending Review.*"

¹ INQ000208841

- 5.6 I also exhibit correspondence to and from MHCLG relating to this work on 30 May 2018, 2 and 16 August 2018 (INQ000205299, INQ000205302, INQ000205303).
- 5.7 In September 2018, CCS continued to have concerns about the deliverability of components following the NSCR (INQ000205304, INQ000205305). An update was taken to Oliver Dowden MP, Minister for Implementation in January 2019 where it was set out that following Cabinet agreement in December 2018 CCS was prioritising no deal preparations. CCS was to continue a small number of essential activities alongside no deal preparations, but had paused other activity to enable sufficient focus on preparations for leaving the EU without a deal. With regards the NSCR, it was intended to finalise those tasks close to completion, including on support to victims, mutual aid, Community Resilience guidance, and assurance and standards (INQ000205308, INQ000205309, INQ000205310).
- 5.8 Regular reports were provided to NSSIG and the NSC(THRC) (R) (O) on progress against the NSCR recommendations [June 2018 INQ000205301; Sept 2018 INQ000205306; Dec 2018 INQ000205307; April 2019 INQ000205313; July 2019 INQ000205321]. It was reported that:

5.8.1 Under the victims strand:

CCS is preparing updated guidance for local responders on data sharing during an emergency, to be finalised by end November 2018.

Improved signposting of support for those affected by emergencies: Victims of Terrorism Unit (VTU) webpage complete and DHSC building on VTU pathways for all types of emergency (OSCT/MoJ/DHSC).

Improve coordination of charitable giving Autumn 2018 (Charities Commission)

'How to set up a victim's unit guide' based on learning from VTU and Grenfell Victims' Unit (CCS) and parity grid by end December 2018;

Update humanitarian assistance guidance (CCS) by end March 2019

5.8.2 Under the assurance strand:

Consultation on pandemic influenza, cyber and community resilience underway

and will be complete by September 2018

Next ten Resilience Standards for Local Resilience Forums (LRFs) end April 2019

Trialling a new approach to assuring and improving local response with 20 LRFs in England co-developing and piloting a framework for LRF self-assessment and peer review (CCS with MHCLG) by end October 2018.

5.8.3 Under the local capacity strand:

Develop our understanding of local capability in a crisis enhancing the training package with RED Training end December 2018 and Cross Government Training end February 2019

MHCLG will publish a revised version of our joint guide with SOLACE; Local Authorities' Preparedness for Civil Emergencies Autumn 2018

5.8.4 Under the support of local capacity strand:

A feasibility study on the establishment of a crisis management professional network to be completed in October.

CCS is developing a mechanism to better facilitate the timely delivery of additional support. This could come from a range of sources, including specific Government expertise and surge capability through a cadre of (senior) deployable experts. Identify sources of national support end November 2018.

Refreshed guidance on spontaneous volunteers,² community resilience and unlocking the potential of the voluntary sector³ by end December 2018

Develop model for a cadre of senior deployable experts by end February 2019.

MHCLG is working with the Local Government Association and the Society of Local Authority Chief Executives on a sector-led model for enhanced local authority mutual aid arrangements end December 2018.

Training for council members will take place at the end of 2018 and early next year. MHCLG are also working closely with SOLACE to explore training for senior

² Published in August 2019 - INQ000208843

³ Published in September 2019 - INQ000208837

officers

Sector resilience

5.9 The PFRB maintained a workstream for departmental sector resilience. In early 2018 CCS obtained a pandemic flu statements of preparedness from the following government bodies relating to their sectors:

- 5.9.1 HMPPS (Prisons and Probation) (INQ000007183)
- 5.9.2 Ministry of Justice (Criminal Justice) (INQ000007184)
- 5.9.3 HMCTS (Courts) (INQ000007182)
- 5.9.4 DfE (Education) (INQ000007249)
- 5.9.5 BEIS (the Chemicals Sector) (INQ000007179)
- 5.9.6 BEIS (Civil Nuclear) (INQ000205331)
- 5.9.7 BEIS (Gas and Electricity) (INQ000205331)
- 5.9.8 BEIS (Oil) (INQ000205295)
- 5.9.9 DCMS (Telecoms) (INQ000007181)
- 5.9.10 Defra (Food) (INQ000007135)
- 5.9.11 Defra (Water) (INQ000007136)
- 5.9.12 DfT (Transport) (INQ000205294)
- 5.9.13 FCO (International) (INQ000205297)
- 5.9.14 HMT (Finance) (INQ000205296)
- 5.9.15 Home Office (Fire) (INQ000007764)
- 5.9.16 MOD (Defence) (INQ000211663)
- 5.9.17 Scotland (Ambulances INQ000211679; Fire INQ000211680; Police INQ000211681; Water INQ000211682; Food INQ000211683)

- 5.10 The NSC(THRC) was updated on this workstream on 12 February 2018, and a paper on sector resilience was presented at the PFRB at the meeting on 21 February 2018 (INQ000021506).
- 5.11 More generally, and separate to the specific work undertaken on Pandemic influenza resilience completed as part of the PFRB workstream, the Government published a 'Public Summary of Sector Security and Resilience Plans summary of sector resilience', most recently in 2018.⁴

The Resilience Standards

- 5.12 As above, some assurance was to be gained through the Resilience Standards project. I have addressed Resilience Standards at paragraphs 4.72 to 4.81 of my second statement.
- 5.13 During 2018-2019 eighteen English LRFs participated in a voluntary pilot scheme to evaluate the National Resilience Standards. The focus of this scheme was on the utility of the standards in practice, the level to which alignment with the standards could be demonstrated with reliable evidence and the degree to which they could be used to support peer review as well as self-assessment. There was a high degree of collaboration between the participating LRFs and the consensus was that no modification to the standards was required and that they were effective in improving the granularity and reliability of the evidence used to demonstrate LRF capabilities and readiness. An update on the Resilience Standards in 2019 is set out here (INQ000047329)
- 5.14 I have set out the requirements of the Pandemic Flu National Resilience standard at paragraph 9.25 of my first statement. I exhibit to this statement the National Resilience Standards as they were published in December 2019 (v.2) (INQ000047332). As discussed elsewhere, the purpose of this Standard was to give assistance to LRFs to assure their capabilities and readiness. The Standards also set out in one place for the purposes of the LRFs relevant guidance from government and elsewhere.
- 5.15 I have been asked specifically about community risk registers. There were questions relating to Community Risk Registers in the Resilience Capabilities Surveys

⁴ INQ000208845

discussed in my first supplementary statement at paragraph 4.15. There was also reference to the Risk Registers in the LRCA discussed above.

5.16 From 2018 aspects of Community Risk Registers formed part of the “LRF Governance” and “Communicating Risks to the Public” Resilience Standard (Resilience Standards 1 and 3), as well as the following (all in place in the 2018 iteration, see paragraph 4.72 of my first supplementary statement):

5.16.1 In National Resilience Standard 4 (Emergency Planning) it was said that an LRF should have plans that address the risks as prioritised within their local Community Risk Registers, and the National Risk Assessment as appropriate

5.16.2 In National Resilience Standard 7 (Exercising) it was said that an LRF should have arrangements to develop realistic and credible but challenging exercise scenarios that reflect the Community Risk Register, local planning assumptions and where appropriate the National Risk Assessment. Exercise scenarios should reflect both the response and recovery phases of emergency incidents;

5.16.3 In National Resilience Standard 9 (Business Continuity Promotion) it was stated that a local authority should have Ensured that the LRF Community Risk Register and related arrangements contains material that is relevant and useful to businesses and voluntary organisations in developing their own resilience.

5.16.4 In National Resilience Standard 12 (Local Recovery Management) it was said that the LRF may consider including in the Recovery management framework both a generic, common consequence approach and tailored annexes explaining specific considerations for recovery from the highest-rated risks identified in the local Community Risk Register, and Exercising for the highest-rated risks in the community risk register; this includes simulated interaction with the cross government ministerial recovery group or equivalents in devolved administrations.

6. SECTION 4 - LOCAL PLANNING

6.1 As I have set out previously, the Cabinet Office does not formally assess or assure local or departmental readiness but rather works to be able to inform and drive cross cutting preparedness across government and the UK generally (respecting devolution agreements). Although, as set out in my earlier statements, the understanding of LRFs' readiness was evidenced through the National Capabilities Survey; lessons from incidents and exercises and issues raised through the regionally based RED advisors in DLUHC. To that end, as well as providing a wide range of guidance to departments and local resilience fora, the Cabinet Office coordinated the RCS, Capabilities programme, horizon scanning and other activity to understand and help departments and local partners address gaps. These programmes covered the range of risks in the NSRA and potential disruptive challenges identified, helping to raise preparedness in general as well as responding to particular risks identified.

6.2 Examples of work carried out to inform departmental readiness, and in relation to research were:

6.2.1 a review of the Department of Health's Emergency, Preparedness, Resilience and Response Function in September 2011 (INQ000205276);

6.2.2 A review of Persistent Lessons identified relation to Interoperability from Emergencies and Major Incidents since 1986, in October 2013 (INQ000018021); and

6.2.3 Lessons from the 2014 Ebola Exercise (INQ000016131).

6.3 I addressed the structure for local resilience in my second statement at §4.62-§4.87, and in particular the delineation of responsibilities between central and local government and services. As I set out there, key drivers for consistency in planning, preparedness and response include:

6.3.1 The ResilienceDirect service, which I addressed in my second statement at §4.46-§4.49

6.3.2 JESIP, which forms the foundation for emergency service joint working, which I addressed at §4.50-§4.61 of my second statement; and

- 6.3.3 National Resilience Standards, which I addressed at §4.72-§4.81 of my second statement and above;
 - 6.3.4 The LRF Guidance , which I addressed at §4.82-§4.84 of my second statement; and
 - 6.3.5 Community Risk Registers and Local Risk Assessments, which I addressed at §4.85-§4.87 of my second statement.
- 6.4 A further mechanism by which resilience teachings were shared and practice was sought to be made consistent across the country was through the LRF Chairs' Forum, which was established in order to share information, facilitate discussions between LRF chairs and join up of planning at the local and national levels across England. This was done through presentations, workshops and discussion sessions involving national, local and international experts and practitioners. They looked ahead at future challenges; reflected on lessons and considered activities to drive preparedness and improve resilience.

Devolved Administrations

- 6.5 On 15 January 2018, CCS invited renewed involvement of the Devolved Administrations on pandemic preparedness. CCS wrote to representatives from the three devolved governments (INQ000205291, INQ000205292 and INQ000205293). These letters: (a) thanked them for their participation in the PFRB post-Exercise Cygnus and (b) sought to arrange meetings about pandemic preparedness later in 2018.
- 6.6 Meetings were held with representatives from the Scottish Government on 27 March 2018 (Agenda: INQ000211676, Minutes: INQ000211677) and the Welsh Government on 14 June 2018 (Agenda: INQ000211678, Minutes: INQ000211684). A meeting scheduled with the Northern Irish government for August 2018 was cancelled.
- 6.7 CCS created a note following these meetings (INQ000105343) and an update for the Devolved Administrations on developments to various workstreams and the ongoing work being undertaken by CCS, including pandemic preparedness (INQ000205300).
- 6.8 The Devolved Administrations input back into the PFRB at the final meeting on 23 January 2020:

- 6.8.1 The Northern Irish response (INQ000186791) provided an update on all five workstreams and, in particular, that the Northern Ireland bodies were drafting a risk register for excess deaths, completing a template for all departments on sector resilience, working towards a final iteration of guidance on pandemic influenza, and working towards the completion of legislation.
- 6.8.2 The Welsh response (INQ000211685) noted that *“All 4 LRF’s in Wales have multi-agency pandemic flu plans that comply with current Cabinet Officer Pandemic Flu Guidance. These plans are validated against a checklist prepared by Welsh Government which has been circulated to LRFs to inform their planning, which was also shared with DHCLG to inform their review of the LRF Guidance.”* Wales also reported taking a number of steps to boost preparedness, including maintaining a range of medical countermeasures in line with planning assumptions for a flu pandemic, engagement with local groups, focusing on healthcare, social care, sector resilience and excess deaths. These steps were subject to review and assurance process by the Welsh agencies.
- 6.8.3 The Scottish response (INQ000211686) noted that they operated six workstreams. Particular progress had been made on the legislative workstream and in the creation of guidance for health and social care, and that they were proactively looking to complete all workstreams.

Business sector

- 6.9 In my supplementary statement, I set out the work CO did to enable businesses to prepare including: business continuity planning assumptions; partnering with business organisations; development of ‘Business Continuity for Dummies’ and other guidance to support Local Authorities in their duties to promote business continuity advice locally. Businesses also had access to the National Risk Register, which the CO made available publicly, to inform their understanding of the risks they faced. The importance of pandemics as a driver of planning was central in the risk information in all relevant material.
- 6.10 Beyond general advice, a range of departments have close relationships with business in general or the sectors they represent - particularly critical infrastructure and nationally significant businesses - and were best placed to continue that

engagement, along local level engagement. Therefore, having provided support material and with an increase in business continuity awareness and wider support available, the Cabinet Office focused activity on cross cutting work on CNI.

7. SECTION 5 - HORIZON SCANNING

7.1 Horizon scanning activities within the Cabinet Office during the relevant period can be broadly separated into three categories:

7.1.1 Civil contingencies horizon scanning. This was and remains very much a core part of Cabinet Office activity. One of the key products in relation to this activity was the CCS Forward Look. For much of the relevant period, information for inclusion within the Forward Look was gathered via a cross-government group of Officials called the Domestic Horizon Scanning Committee (DHS Committee).

7.1.2 Within CCS, there was a small, bespoke team, led by a Deputy Director, called the "Crisis Management, International Readiness and Response Team". The team focused on major national hazards that could affect UK interests internationally. The team was responsible for liaising with UN agencies, the EU, NATO and other nations to improve international risk assessment and preparedness, and could also activate mechanisms to draw on emergency assistance from across the EU (or provide UK expertise to partners). Following the 2014 Ebola outbreak, the team's work was expanded to focus on tracking the risk to the UK from similar international causes (e.g. Zika), and building rapid scanning and cross-Government response systems for major international incidents. The team coordinated cross-Government consideration of emerging risks and in the event of a major international hazard would co-ordinate the Government's response. After 2016 the domestic and international elements of response in CCS were brought under joint leadership.

7.1.3 There was a specific team within the Cabinet Office which was titled the "Horizon Scanning Programme Team". This had no relation to civil contingencies/CCS, and would have no role in issues like pandemic preparedness. Its remit was to look at future trends, for example artificial intelligence, and not purely through a lens of risks and hazards, but for policy making more broadly.

Domestic Horizon Scanning Committee and the "CCS Forward Look"

7.2 This pertains to the first category of horizon scanning as set out in the preceding paragraph.

- 7.3 The DHS Committee was a group of officials from across a range of government departments, charged with discussing and agreeing the “CCS Forward Look”. As I identified at §5.6 of my second statement, the CCS Forward Look was a document compiled on a quarterly basis to outline the most significant risks to the UK in the next six months. The CCS provided secretariat functions for the committee, and was responsible for the drafting and publication of the Forward Look, with departmental input from across government. The DHS Committee’s Terms of Reference from 2002 (INQ000205325) stated that it was charged with the following: “*To monitor and give warning of the development of direct or indirect non-terrorist or non-military challenges which have the potential to seriously disrupt UK life or the operation of UK Government.*”
- 7.4 The Forward Look was a cross-government assessment of the most significant domestic risks over a six-month period. It was intended to raise awareness of the main potential challenges and to guide short-term planning by Departments and others over that period. Since 2003 it had been the key output of the DHS Committee. The Forward Look was issued quarterly. Departments were commissioned to provide updates for the Forward Look, and then a draft would be circulated for discussion at a meeting of the DHSC. Such meetings did not typically have a formal agenda or chair’s brief (prior to changes made in the course of 2019) and were not formally minuted. Instead, officials would discuss the first draft of the Forward Look, and suggest amendments or take away action points to their departments to provide further detail or address additional matters.
- 7.5 Following the DHS Committee meeting, CCS led on finalising the Forward Look, compiling departmental contributions. The finalised product would then be sent to the Chancellor of the Duchy of Lancaster along with a draft letter for the Chancellor of the Duchy of Lancaster to send to the Prime Minister highlighting the most significant risks he or she should be aware of.
- 7.6 In 2019, the CCS considered the future of the Forward Look, stating that its purpose, objectives, content, format and process needed to be reviewed
- 7.7 The results of this informal review are summarised in an email which I exhibit here (INQ000205318) and in attachments which I exhibit here (INQ000205319) and here (INQ000205320). The revised method for producing and circulating the Forward Look involved sending the draft to the Chancellor of the Duchy of Lancaster for clearance, along with a draft letter from the Prime Minister, under cover of which the Forward

Look would be circulated to members of NSC(THRC). This revised process first took place on 26 July 2019. I exhibit that submission and its annexes here (INQ000047203).

7.8 In respect of the substance of the information passed up to the THRC, the DHS Committee kept novel influenza strains (as well as other outbreaks posing a threat to human health) under review in the years leading up to the Covid-19 Pandemic. The focus of the DHS Committee was not on the hypothetical risk of a pandemic flu-type outbreak, but rather the actual outbreaks posing immediate risk.

7.8.1 In July 2019, the Forward Look submission addressed the risks to human health from, and in particular the high levels of, seasonal flu in Australia, but considered that there was no evidence of novel strains and noted that the Australian Government considered that the clinical severity of the outbreak was low. Plans were put in place by DHSC, PHE, NHS England and NHS Improvement to ensure a comprehensive seasonal flu vaccine programme and the timely vaccination of at-risk groups (INQ000047203).

7.8.2 Seasonal influenza was addressed in the October 2019 Forward Look (INQ000205323, INQ000205324).

7.8.3 By January 2020, the Forward Look contained the new risk of the spread of a novel coronavirus from Wuhan, China (INQ000205326, INQ000205327, INQ000205328). The Forward Look notes that *"PHE, DHSC, FCO and CCS are actively monitoring the situation and holding regular meetings. Relevant departments have stood up their crisis centres. PHE has very changed the risk to the UK from VERY LOW to LOW. PHE continue to monitor the ongoing situation"* and *"PHE's planned response includes assessing the risk to public health in the UK; detecting and preventing any onwards transmission; developing a diagnostic test for the virus and preparing guidance for health professionals and the public. Port health measures are now in place for all airports with direct flights from China. FCO have updated their travel advice, on the recommendation from the CMO, for Wuhan to advise against all but essential travel and to note the travel restrictions put in place by the Chinese Government."*

7.9 Furthermore, the DHS Committee updated and informed the PFRB in, by way of example, the PFRB meeting on 23 January 2020 (INQ000186792).

- 7.10 The process for reviewing and issuing the Forward Look further changed in mid-March 2020, when it was decided that COBR(O) (rather than DHS Committee) should be responsible for reviewing the Forward Look (INQ000205329). In June 2020, the Forward Look was suspended in light of the Covid 19 pandemic (INQ000205330), and re-started in June 2021.
- 7.11 As described in Section 5 of my second witness statement, this was complemented by daily horizon-scanning for immediate upcoming risks.

8. SECTION 6 - INTERNATIONAL COOPERATION

8.1 I have been asked to expand upon paragraph 8.79 of my first statement, where I discussed how the international work of the CCS changed in intensity over time. As I sought to set out in that statement, prior to the Swine Flu epidemic there was particularly intensive work on preparedness and the UK led on that work internationally. The Swine Flu pandemic pressed home to others the lesson that we had already absorbed – that pandemic preparedness was of great importance, and it led other countries to seek to emulate some approaches which the UK had already adopted, such as our method of risk assessment. Further, following Swine Flu, very significant work was carried out by the Department of Health in relation to the Pandemic Flu Strategy. It was not consistent with CCS' role to continue to devote significant resources from the centre in managing that work when its skills were needed more in relation to other hazards and threats.

The Hyogo Framework and the Sendai Declaration

8.2 The UK adopted both the Hyogo framework in 2005 and the Sendai declaration in 2015.

8.3 It was the first country to be peer reviewed under the Hyogo framework in 2013, under a pilot scheme. I exhibit this review at INQ000205278. The 'key findings' section of the review found that:

“the UK has achieved a high level of preparedness, which helps national and regional authorities to respond to a variety of disruptive challenges and provide an effective and coordinated crisis-management response... Sophisticated mechanisms have been put in place to coordinate the actions of various levels of government and its agencies at national and local levels. The authorities at all levels have an understanding of the medium-term risks that they face as well as the ability to identify emerging risks over the shorter and medium-long terms. Plans and capabilities are in place at all levels for those risks assessed by policy-makers to warrant separate and dedicated planning.

In many respects, the UK resilience approach shows state-of-the-art innovations, including:

- *large use of science to support policy;*

- *attention to business-continuity issues and full partnerships with the private sector;*
- *flexible institutional mechanisms and partnerships focused on delivery through voluntary approaches;*
- *professional and dedicated co-workers in the field of DRR throughout the country;*
- *national commitment to continue improving policy-making and pushing further implementation.*

- 8.4 The key findings section of the report noted that the UK deserved “*much praise for its achievements,*” but gave a few areas with scope for improvement, “*for example enlarging the focus of the UK resilience from emergency preparedness and response towards more prevention and vulnerability reduction*”.
- 8.5 The United Kingdom was one of five countries on the European Forum for Disaster Risk Reduction Working Group on Governance and Accountability which provided a review of best practice in disaster risk reduction against the Hyogo Framework (INQ000205279).⁵
- 8.6 The implementation of the Hyogo framework was reviewed in 2015 in the document “Implementing the Hyogo Framework for Action in Europe: Advances and Challenges”⁶, authored by the United Nations Office for Disaster Risk Reduction (“UNIDSR”). This document noted in particular that the Natural Hazards Partnership in the United Kingdom had been a model for the European Commission’s Disaster Risk Management Knowledge Centre, launched in 2015 to enhance EU and Member State resilience to disasters and their capacity to prevent, prepare and respond to emergencies through a strengthened interface between science and policy,
- 8.7 The Sendai Declaration was adopted by the UK and 187 other countries at the World Conference on Disaster Risk Reduction (WCDRR) which took place in Sendai, Japan in March 2015. PHE carried out a review of its activities and the progress under the Sendai Declaration in 2017,⁷ which was supported by UNIDSR. This report stated that “*the first deadline for the Sendai Framework is to have national and local disaster*

⁵ INQ000208844

⁶ INQ000208840

⁷ INQ000208842

risk reduction strategies in place by 2020. England has already made great progress on this, for example, through the establishment of the Extreme Events and Health Protection team that have developed and implemented extreme weather plans for heat and cold events. The threat from pandemic flu remains the top national risk and the Pandemic Influenza Response Plan details PHE's roles and responsibilities during the preparation for and response to a pandemic." The UN Office for Disaster Risk Reduction (UNDRR) produced reports summarizing adoption of targets (for example in relation to Target E (Disaster Risk Strategies)⁸.

Other organisations

8.8 I have been asked about the extent to which the UK continued to work with other international organisations after 2012.

8.9 The principal work was carried out with the EU. This included:

8.9.1 Attending meetings of the European Forum for Disaster Risk Reduction ("EFDRR"), founded in London in 2009. The EFDRR met annually at a public forum. The EFDRR set down a roadmap for implementation of the Sendai Framework (INQ000205286)⁹;

8.9.2 Attending meetings of the Civil Protection Committee and Director General meetings, at which best practice was shared. These covered issues such as risk assessments (INQ000205277). In April 2019 a presentation was given on High Impact Low Probability Events which indicated that at that stage 9 member countries considered pandemic to be a priority (of which one was the UK) (INQ000205314);

8.9.3 Engaging with the Disaster Risk Management Knowledge Centre. The UK hosted the first Scientific Seminar in November 2015;

8.9.4 Being involved in workshops and sharing information. As one example, I provide notes from a workshop sharing national risk assessment methodologies in the European Crisis Management Laboratory in 2015 (INQ000205281).

⁸ INQ000208846

⁹ INQ000208840

- 8.9.5 Working to implement and respond to EU decisions and notices such as Decision No 1313/2013/EU (on a Union Civil Protection Mechanism); the production of Risk Management Capability Assessment guidelines (2015/C 261/03); Decision EU 2018/945 (on the communicable diseases and related special health issues to be covered by epidemiological surveillance). One effect of the EU decisions post-Swine Flu was to promote national risk assessments akin to the United Kingdom's NRA and NSRA.
- 8.10 There was also significant bilateral contact with other countries, for example with the US Federal Emergency Management Agency (FEMA). There was a two day meeting between FEMA and CCS between 27 and 27 April 2018 which covered various issues of domestic planning and international cooperation, including pandemic flu preparedness. The UK would engage with countries which had experienced crises, such as the Fukushima incident in Japan, in order to obtain practical knowledge as to how resilience agencies had performed in those situations.
- 8.11 In my supplementary statement I mentioned work with the OECD. The OECD held a High Level Risk Forum which met annually from 2011 and collated good practices on disaster risk management from across the world. This provided reports such as "Good Governance for Critical Infrastructure Resilience" (INQ000205312¹⁰) in April 2019 and "National Risk Assessments: a Cross Country Perspective"¹¹.

¹⁰ INQ000208839

¹¹ INQ000208847

9. SECTION 7 - EQUALITY PLANNING

9.1 The Public Sector Equality Duty requires public authorities, when exercising their functions, to have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity and foster good relations between those who share protected characteristics and those who do not. My understanding is that this applies to a public authority when it exercises any of its functions. This includes when exercising functions or duties under the Civil Contingencies Act 2004.

9.2 General guidance for public authorities on how to approach compliance with the Public Sector Equality Duty is available from the Government Equalities Office and the Equality and Human Rights Commission. In addition, the Civil Contingencies Act 2004 is supported by extensive guidance, including guidance on assessing the needs of people with characteristics which are protected under the Equality Act 2010, including:

9.2.1 "Preparation and planning for emergencies: responsibilities of responder agencies and others" [INQ000092642] which, amongst other things, advises responder agencies that emergency plans should focus on three key groupings of people (the vulnerable, victims and responder personnel).

9.2.2 "Emergency Preparedness: Chapter 5 (Emergency Planning)" [Exhibit to follow¹²], which at paragraphs 5.98 to 5.103 sets out guidance as to how emergency planners should give special consideration to the needs of the vulnerable.

9.2.3 "Emergency Preparedness: Chapter 7 (Communicating with the Public)" [Exhibit to follow]¹³ provides local responders with guidance as to how to communicate with vulnerable persons and others who have difficulty understanding communications. The main guidance in relation to these groups is set out at paragraphs 7. 72 to 7. 77.

9.2.4 "Identifying people who are vulnerable in a crisis" [INQ000097681]. This guidance considers the needs of a wide range of people who may be more "vulnerable" in an emergency, including persons who are protected by

¹² INQ000208838

¹³ INQ000208836

certain anti-discrimination legislation which preceded the Equality Act 2010. This guidance pre-dates the Equality Act 2010 and so refers to previous equalities-related legislation.

9.2.5 "Expectations and Indicators of Good Practice Set for Category 1 and 2 Responders" [INQ000205315]. This provides, at point 6 on page 16, that it is a "mandatory requirement" that special consideration is given to vulnerable people when producing plans. At point 29 on page 28, it reminds responders of the need to consider vulnerable groups when communicating with the public.

9.3 Also, the National Resilience Standards expressly remind local responders of their legal duties under the Equalities Act 2010.

10. **SECTION 8 - BUDGETING**

- 10.1 In paragraphs 9.134-9.136 of my first statement, and 4.43-3.45 of my second statement, I provided a high-level description of funding for CCS. I now meet the commitment in my second statement to provide the relevant budget documents for CCS.
- 10.2 I exhibit a spreadsheet providing a detailed breakdown of the CCS budget and actual spending from 2010 to 2020 (INQ000205332). These include both RDEL (resource spend) and CDEL (capital spend). Due to system limitations, the 2012/13 actuals data could not be extracted, but the budget for that year is provided.
- 10.3 The spreadsheet shows that spending on the readiness and response team was broadly stable throughout the period. It also shows that CCS was given significant additional funding for the Yellowhammer EU Exit preparedness work.
- 10.4 I also provide the budget delegation letters, from the National Security Adviser or Deputy National Security Adviser to the Director of CCS, for the most recent years of the relevant period: 2017-18, 2018-19 and 2019-20 (INQ000205288, INQ000205311 and INQ000205322).

11. **SECTION 9 - ADDITIONAL EXHIBITS**

11.1 I provide below, as requested, additional exhibits which can be read alongside my first statement.

Paragraph in first statement	Exhibit reference	Document
4.2	INQ000196527	Sir Michaels Pitt's independent Review of the 2007 Summer Floods
8.10 and 8.17	INQ000196530	Part 1 & 2 of the CCA 2004
8.27	INQ000196532	Preparation and Planning for Emergencies: Responsibilities of responder agencies and others
8.77	INQ000005371	Sendai Framework for Disaster Risk Reduction
8.90	INQ000196529	2022 Post Implementation Review of the CCA
8.132	INQ000196531	Pandemic Influenza: Guidance on meeting the needs of those who are or may become vulnerable during the pandemic
9.154	INQ000196528	UK-EU Trade and Cooperation Agreement
9.155	INQ000196533	Memorandum of Understanding between UKHSA and the European Centre of Disease Prevention and Control on 1 December 2021
9.157	INQ000196534	Health Security (EU Exit) Regulations 2021

Statement of Truth

I believe that the facts stated in this corporate statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed: Personal Data _____

Dated: 26 May 2023_____